IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: 　Gary J. Verdun	§ § §	
Serial No.　09/707,585	§ §	Examiner:　Butler, Dennis
Filed:　　November 6, 2000	§ §	Group Art Unit:　2115
For:　PROCESSOR POWER STATE 　　TRANSITIONS USING SEPARATE 　　LOGIC CONTROL	§ § § §	**RECEIVED** MAY 2 5 2004 Technology Center 2100

AMENDMENT AND REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.111

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 26, 2004, please amend the above-identified application as follows:

INTRODUCTORY COMMENTS

Claims 1, 4, 11, 14 and 15 are amended, claims 7-10, 12 and 13 are cancelled and claims 1-6, 11 and 14-15 remain in the application. Re-examination and reconsideration of the application, as amended, are requested.

AMENDMENTS TO THE SPECIFICATION

None.

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	§	
Serial No.: 09/707,585	§	Group Art Unit: 2115
	§	
Filed: November 6, 2000	§	Examiner: Butler, Dennis
	§	
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Mail Stop Amendment
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P.O. Box 1450
Alexandria, VA 22313-1450

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Technology Center 2100

Sir:

In response to the Office Action dated February 26, 2004, enclosed are the following regarding the above-identified patent application:

1. Amendment and Request for Reconsideration Under 37 CFR §1.111;

2. Return postcard; and

3. Transmittal letter.

[ ] Small entity status of this application has been established by a previously submitted verified statement under 37 C.F.R. §§ 1.9 and 1.27.

[X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	9	minus	15	= 0	x 9	$_____	OR	x 18	$____0.00
INDEP	2	minus	4	= 0	x 43	$_____	OR	x 86	$____0.00
[ ]	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 140	$_____	OR	+ 280	$_____
					TOTAL	$_____	OR	TOTAL	$____0.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

[ ] Please charge Deposit Account No. [08-1394 H&B] in the amount of $_____.
[ ] A check in the amount of $_____ is attached.
[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. [08-1394 H&B, Order No. 16356.737 (DC-02355)].
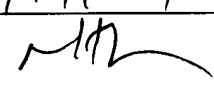
[X]   Any additional filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
[ ]   Any patent application processing fees under 37 C.F.R. § 1.17.
[ ]   A copy of this sheet is enclosed.

Respectfully submitted,

James R. Bell
Registration No. 26,528

Dated: *5-19-04*

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A-163530_1.DOC

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

on   *5/19/0 4*

Date

Signature *NISHI PASARYA*

Typed or Printed name of person signing Certificate